FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

	PREVIOUS YEAR TOTAL	TOTAL	Service Workers	Laborers and Helpers	Operatives	Craft Workers	Administrative Support Workers	Sales Workers	Technicians	Professionals	First/Mid-Level Officials and Managers	Executive/Senior Level Officials and Managers		Job Categories			Job Categories				Job Categories				Year Report Filed		SECTION 1 - General Information 1. Name and Mailing Address of Respondent
	11	10	9		7	6	ر ن	4	ω	2	d 1.2	=======================================							SECTION II - Full-Time Employees.			ouri Ru 6354	ormation ress of R				
		0											۸	Male		Hispa			s.			ral Telep 5	espondent				
		0											В	Female		Hispanic or Latino				Period Covered 02/17/18	3. Reportin	hone Co					
	21	19				17					2		C	White						Period Covered by Report) 02/17/18	a Period (En						
		0											D	Black or African American						Reporting Period (Ending Date of Pay Period Covered by Report) $02/17/18$	ding Date of F						
		0		e									Е	Native Hawaiian or Other Pacific Islander	_						Jav						
		0											F	Asian	Male												
		0											6	American Indian or Alaska Native				Nur (Report emp		Reportin	4. Number of Full-Time Employees during Selected						
		0											I	Two or more races		Not-Hispa	Race/Ethnicity	Number of Employees (Report employees in only one category)		Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)	of Full-Time F						
	11	10					9					1		White		Not-Hispanic or Latino	Ą	oyees one category		ck one): (complete Se	mployees du						
	v	0											J	Black or African American			181	0		ctions I, IV, ar	ring Selected						
		0											_	Native Hawaiian or Other Pacific Islander	Fe					nd V only)							
		0						-					٢	Asian	Female												
		0							7				×	American Indian or Alaska Native								is a					
FCC 395 Revised December 2007		0										Di .	z	Two or more races								Check here if this is a change of address.					
FCC 395 cember 2007	32	29	0	0	0	17	9	0	0	0	2	-	0		Columns A - N	Total						o,					

SECTION III - Part-Time Employees.	/ees.														
	W						Num (Report empl	ber of Emplo	Number of Employees (Report employees in only one category)						
Job								Race/Ethnicity	Y						
Categories	ı	Hispanic or						Not-Hispan	Not-Hispanic or Latino						Total
		Launo			M	Male					Fen	Female			Columns A - N
	Male	Female	White	Black or	Native	Asian	American	Two or more	White	Black or	Native	Asian	American	Two or more	:
			*	African American	Hawaiian or Other Pacific Islander		Indian or Alaska Native	races		African American	Hawaiian or Other Pacific Islander			races	
	>	В	С	D	Е	П	9	Ξ	-	۲	*	Г	Z	z	0
Executive/Senior Level Officials and Managers 1.1		3													0
First/Mid-Level Officials and 1.2 Managers	2										¥				0
Professionals	2														0
Technicians	ω							×							0
Sales Workers	4													A.	0
Administrative Support Workers	5								1						-
Craft Workers	6						¥								0
Operatives	7														0
Laborers and Helpers	8														0
Service Workers	9								1						1
TOTAL 1	10 0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
PREVIOUS YEAR TOTAL 11									_						1
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	ination Cor	nplaints Pursu	ant to 47 CFF	22.321, 23.5	5, 90.168, 101	.4, and 101.	311.								
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	Commission body having Commission ng parties in	n that no compla g competent juri n that the followi volved, date file	sdiction in suc sdiction in suc ng complaints d, courts or ag	violations of t h matters duri alleging violat encies before	he equal empl ng the calend ions of the pro which the ma	loyment provi ar year coven ovisions of an	sions of Fede ed by this rep y equal emplo heard, file nu	ral, state, terri ort. yment opport mber or other	itorial, or local unity statute h	statutes have nave been file and current s	have been filed against this nifled against this company and status or disposition.	gainst this company. sition.			
SECTION V - Certification certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct	wledge, info	rmation, and be	lief, all statem	ents in this rep	ort are true a	nd correct.									
Date Ty	ped or Print	Typed or Printed Name of Person Signing	son Signing			Signature	2 ,	5	000	,		Telephone No.			
	Aichele	Michele Gillespie		WILL ET III Y	ENI CE CTAT	7	uch	Clex	Rele	Spee		(660) 8	(660) 874-4111		
General Manager				OF ANY STA	TION LICENS	SE OR CONS	TRUCTION F	ERMIT (47 U	S.C. 312 (A)	1) AND/OR F	ORFEITURE	(47 U.S.C. 5)	03).	OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	OCALION